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SECRETARY STATE STATE ALL ANASSEE FLORIDA

Amend hos manuallo

COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF COR	PORATION:	I. Scott Skier, PA		
DOCUMENT N	JMBER:			
The enclosed Arti	cles of Amendment and fee a	re submitted for filing.		
Please return all co	orrespondence concerning thi	s matter to the following:		
		I. Scott Skier		
	N	Name of Contact Person		
		I. Scott Skier, PA		
		Firm/ Company		
	100 S. Dixie Highway, 306			
		A ddress		
		Palm Beach, FL 33401 ity/ State and Zip Code		
	E-mail address: (to be use	d for future annual report notification)		
For further inform	ation concerning this matter,	please call:		
	I. Scott Skier	at (561) 8 Area Code & Daytime Te	320-1508	
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depar	rtment of State:	
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52 50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing A Amendme	nt Section	Street Address Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		

2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 19, 2010

I. SCOTT SKIER
I. SCOTT SKIER, ESQUIRE, P.A.
100 S. DIXIE HIGHWAY #306
WEST PALM BEACH, FL 33401

SUBJECT: I. SCOTT SKIER, ESQUIRE, P.A.

Ref. Number: P06000055898

We have received your document for I. SCOTT SKIER, ESQUIRE, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 110A00027205

10 DEC -7 AM 8: 05
SECRETARY OF STATE

Articles of Amendment

to Articles of Incorporation of

I. Scott Skier,	Esquire, P.A.	700
(Name of Corporation as currently filed w	· · · · · · · · · · · · · · · · · · ·	—
P060000558	398	
(Document Number of Corp		
Pursuant to the provisions of section 607.1006, Florida S amendment(s) to its Articles of Incorporation:	tatutes, this Florida Profit Corpor	ration adopts the follow
A. If amending name, enter the new name of the corpor	ration:	
The Skier Law	Firm, P.A.	The new
name must be distinguishable and contain the word "abbreviation "Corp.," "Inc.," or Co.," or the designation name must contain the word "chartered," "professional as	n "Corp," "Inc," or "Co". A proj	fessional corporation
B. Enter new principal office address, if applicable:	105 S. Narcissus Avenu	e.
(Principal office address MUST BE A STREET ADDRES	<u>SS</u>) Suite 410	-
	-	
	West Palm Beach, Florid	<u>da 33401</u>
C. Enter new mailing address, if applicable: (Mailing address MAYBEA POST OFFICE BOX)	105 S. Narcissus Avenue	9
	Suite 410 West Palm Beach, Florid	a 33401
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		name of the
Name of New Registered Agent: 1. Scott Sl	kier	
105 S. Na	arcissus Avenue, Suite 410	
·	Florida street address)	
West Paln	n Beach, Flor	rida 33401
(0	City) (Zip Code	
New Registered Agent's Signature, if changing Registere	ed Agent:	
I hereby accept the appointment as registered agent. Lam j		tions of the position.
Signature of 1	Ne Registered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

Type of Action Address <u>Title</u> <u>Name</u> _ 🛮 Add ☐ Remove Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares. provisions for implementing the amendment if not contained in the amendment itself; (if not applicable, indicate NA)

The date of each amendment	t(s) adoption:
•	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
✓ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	11/10/10
Signature	
scl	extinector, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court cointed fiduciary by that fiduciary)
	I. Scott Skier
	(Typed or printed name of person signing)
	President
	(Title of person signing)